New Jersey State Department of Education Office of Licensure and Credentials

NON-CITIZEN AFFIDAVIT OF INTENT TO BECOME A CITIZEN

IMPORANT: This form is to be completed by only those individuals who are NOT U.S. citizens.

| A. Please print your name as it appears on any documentation that you are required to submit. | | | | | | | |
|--|--------------------|-----------------------|--------------|------------------------------|--|--|--|
| Last Name | First Name | | | Middle Name/Initial | | | |
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| Street Address | | | | | | | |
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| City | | State Zip | | Zip | | | |
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| Carlot Carrolla Mandage | D.t. M | T41- | Desi | V | | | |
| Social Security Number | Date M Of | onth | Day | Year | | | |
| | Birth STA | | | | | | |
| E-mail Address | 02 30/ | rea Code | | | | | |
| E-man Address | Number | Z Code | | | | | |
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| GRE | 14 July (1) | YEL | " | • | | | |
| B. Oath of Intent | | | | | | | |
| Oath of intent to become a citizen of the United States. | | | | | | | |
| 2776.5 | | | | | | | |
| I,, being o | of adult age and | duly sworn upon | my oath do d | epose (or hereby affirm) and | | | |
| say that: | | | | | | | |
| I make this affidavit to clarify my citizenship status in order to be eligible for licensure by the New Jersey State Board of Examiners. | | | | | | | |
| | | | | | | | |
| h) I seel lierassa fen emplesse et er e | | | | | | | |
| b) I seek licensure for employment as a | | | | | | | |
| | | | | | | | |
| c) I am currently a citizen of | | | | | | | |
| | | | | | | | |
| d) Lintand to handman a sitiran of the United States w | ithin the next fir | vo (5) voors | | | | | |
| d) I intend to become a citizen of the United States within the next five (5) years. | | | | | | | |
| | | | | | | | |
| e) I recognize that if I do not become a United States citizen within the next five years the New Jersey State Board of Examiners may revoke any license issued to me. | | | | | | | |
| f) My current status in this country is that of | | | | | | | |
| 1) 1419 Current status in this country is that of | | | | | | | |
| | | | | | | | |

| C. Certification | | | | | | | | |
|---|--|---------------------|----------------------------|----------------|--|--|--|--|
| Responses to the following two questions are mandatory. Failure to complete these items will result in rejection of the candidate's | | | | | | | | |
| application for certification. | | | | | | | | |
| | | | Circle which applies below | | | | | |
| Have you ever had a certificate revoked or suspended | in this or any state or any jur | isdiction outside | | | | | | |
| of the United States? | | | Yes | No | | | | |
| | | | | | | | | |
| Have you ever been convicted of a criminal offense in this or any other state or any jurisdiction | | | | | | | | |
| outside of the United States? | | | Yes | No | | | | |
| | | | | | | | | |
| | | | | | | | | |
| D . Verification of Accuracy | | | | | | | | |
| I hereby certify under penalty of perjury under the law | ws of the United States of A | merica that the fac | tual representation | ons made by me | | | | |
| herein are true and accurate. | | | | | | | | |
| | | | | | | | | |
| Applicant's Signature (in ink) | Da | te | | | | | | |
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| Notary Seal | Notary Signature | | | | | | | |
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| Once completed, mail the form to: | | | | | | | | |
| New Jersey State Department of Education Office of Licensure and Credentials | | | | | | | | |
| P.O. Box 500 | | | | | | | | |
| 1.O. Bo | 11 200 | | | | | | | |

Trenton, New Jersey 08625-0500

Attention: Affidavit of Intent to Become a Citizen

OL&C09/10/2007-WMK